Fill in this information to identify your case:		1	
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under:		
	Chapter 7 Chapter 11		
	Chapter 12 Chapter 13		Check if the amended f

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself	f	
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name	Rachael	
	First name	First name
Write the name that is on	M	
your government-issued picture identification (for	Middle name	Middle name
example, your driver's	Tichacek	
license or passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the	First name	First name
last 8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4	XXX - XX- 4441	xxx - xx-
digits of your Social Security number or federal	OR	OR
Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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De	ebtor 1 Rachael	M	Tichacek	Case number (if k	nown)	
	First Name	Middle Name	Last Name			
		About Debtor 1:		About Deb	otor 2 (Spouse Only	y in a Joint Case):
4. Any business names and Employer		I have not used any busine	ess names or EINs.	I have no	ot used any business nam	nes or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business n	ame	
	last 8 years	Business name		Business n	ame	
	Include trade names and doing business as names	EIN		EIN		
		EIN		EIN		
5.	Where you live	707 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		If Debtor 2 I	lives at a different addr	ress:
		707 Wilcox St Number Street 1		Number	Street	
		Joliet Illinois	60435			
		City State	Zip Code	City	State	Zip Code
		Will County		County		
		If your mailing address is diffill it in here. Note that the cour this mailing address.		If Debtor 2's	mailing address is diffe that the court will send ar	
		Number Street		Number	Street	
		City State	Zip Code	City	State	Zip Code
6.	Why you are choosing this	Check one:		Check one:		
	district to file for bankruptcy	Over the last 180 days bef lived in this district longer	fore filing this petition, I have than in any other district.		e last 180 days before filin this district longer than in	
		I have another reason. Exp	olain. (See 28 U.S.C. §§ 1408.)	I have ar	nother reason. Explain. (S	See 28 U.S.C. §§ 1408.)

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Debtor 1 Rachael	M IIchacek Case number (if known) Middle Name Last Name	
First Name Part 2: Tell the Court Ab	Middle Name Last Name bout Your Bankruptcy Case	
7. The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individual B2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7 Chapter 11 Chapter 12 Chapter 13	als Filing for Bankruptcy (Form
8. How you will pay the fee	 ✓ I will pay the entire fee when I file my petition. Please check with the clear court for more details about how you may pay. Typically, if you are paying may pay with cash, cashier's check, or money order If your attorney is so on your behalf, your attorney may pay with a credit card or check with a premote of the pay the fee in installments. If you choose this option, sign and a lindividuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you as By law, a judge may, but is not required to, waive your fee, and may do so less than 150% of the official poverty line that applies to your family size and the fee in installments). If you choose this option, you must fill out the Apple Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition 	the fee yourself, you ubmitting your payment printed address. attach the Application for are filing for Chapter 7. only if your income is and you are unable to pay dication to Have the
9. Have you filed for bankruptcy within the last 8 years?	✓ No. When Case number	
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No. Yes. Debtor Relationship to the properties of the prope	if knowno you
11. Do you rent your residence?	 No. Go to line 12. ✓ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in you ✓ No. Go to line 12. ☐ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) at this bankruptcy petition. 	

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Debtor 1 Rachael First Name		Midd	dle Name	Last Name	Case number	(if known)		
	y Bus		es You Own as a S		r			
12. Are you a sole proprietor of any full- or part-time business?	✓□	No. Yes.	Go to Part 4. Name and location of b	pusiness				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Re Stockbroker (as	Street Street	in 11 U.S.C. § 101(27 <i>I</i> ned in 11 U.S.C. § 101(,,	de	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	dead opera	llines. If y ations, ca C. § 11 1 No.	ou indicate that you are ash-flow statement, and 6(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code.	a small business de federal income tax napter 11. ter 11, but I am NO	ebtor, you must attach y return or if any of these T a small business deb	our most recent bate documents do no	o that it can set appropriate plance sheet, statement of the exist, follow the procedure the definition in the sankruptcy Code in the san	in 11
Part 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any	Property That Ne	eds Immediat	e Attention	
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or			What is the hazard? If immediate attention is	needed, why is it ne	eeded?			
safety? Or do you own any property that needs immediate attention?			Where is the property?	Number	Street			
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	Sta	ate	Zip Code	

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Debtor 1 Rachael M Tichacek Case number (if known) First Name Middle Name Last Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): 15. Tell the court You must check one:

whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. ✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required counseling beca	quired to receive a briefing about credi because of:			
Incapacity.	I have a mental illness or a mental			

deficiency that makes me incapable of realizing or making rational decisions about finances

about finances.

Disability. My physical disability of

 My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

I received a briefing from an approved credit
counseling agency within the 180 days before I filed
this bankruptcy petition, and I received a certificate of
completion

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in

a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Rachael	M Middle Name	Tichacek Case number (if I	known)
Part 6: Answer These Qu	uestions for Reporting Purpo		
16. What kind of debts do you have?	16a. Are your debts primari 101(8) as "incurred by a No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primari obtain money for a busir investment. No. Go to line 16c. Yes. Go to line 17.	ily consumer debts? Consumer delan individual primarily for a personal illy business debts? Business debt ness or investment or through the o	, family, or household purpose." 's are debts that you incurred to peration of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be avail No. Yes.		rty is excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below			
For you	and correct. If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Chalf no attorney represents me me fill out this document, I had I request relief in accordance I understand making a false sconnection with a bankruptcy years, or both. 18 U.S.C. §§ 2 /s/ Rachael Tichacek Signature of Debtor 1 Executed on	Chapter 7, I am aware that I may p d States Code. I understand the relief apter 7. and I did not pay or agree to pay so ave obtained and read the notice receive with the chapter of title 11, United Statement, concealing property, or or case can result in fines up to \$250, 152, 1341, 1519, and 3571.	States Code, specified in this petition. btaining money or property by fraud in

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Debtor 1 Rachael	M	Tichacek	Case number (if	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	eligibility to proceed ur the relief available und to the debtor(s) the no	nder Chapter 7, 11, 12, of Her each chapter for wh tice required by 11 U.S.	or 13 of title 11, Unich the person is el C. § 342(b) and, in	at I have informed the debtor(s) about nited States Code, and have explained ligible. I also certify that I have delivered a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the
	Signature of Attorney	for Debtor		MM / DD / YYYY
	Angie Harb Printed name Semrad Law Firm Firm name 20 S. Clark Street Street 28th Floor			
	Chicago	ı	Ilinois	60603
	City	5	State	Zip Code
	Contact phone		Email address	aharb@semradlaw.com
			Illinoi	is
	Bar number		State	

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Fill in this inform	nation to identify your cas	e:		
Debtor 1	Rachael	M	Tichacek	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	
Case number (If known)			(State)	

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$6,417.00
1c. Copy line 63, Total of all property on Schedule A/B	\$6,417.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$0.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$35,369.00
Your total liabilities	\$35,369.00
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$2,272.28
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$2,410.00

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Deb	otor 1		М	Tichacek	Case n	umber (if known)		
		First Name	Middle Name	Last Name				
Par	t 4:	Answer These Questions	for Administrati	ve and Statistical R	ecords			_
6. A	re yo	ou filing for bankruptcy under C	Chapters 7, 11, or 13?					
		lo. You have nothing to report on the	his part of the form. Ch	eck this box and submit th	nis form to the co	urt with your other schedule	es.	
	✓ Ye	es.						_
7. V	Vhat I	kind of debt do you have?						
		our debts are primarily consum						
		our debts are not primarily con his form to the court with your other		ve nothing to report on this	s part of the form	n. Check this box and subm	iit	
		n the <i>Statement of Your Currer</i> 122A-1 Line 11; OR , Form 122B l	•		onthly income fro	m Official	\$2,240.29	
9.	Cop	by the following special categor	ries of claims from P	art 4, line 6 of Schedule	E/F:			
	Froi	m Part 4 on Schedule E/F, copy	the following:			Total claim		
	9a. I	Domestic support obligations (Cop	py line 6a.)			\$0.00		
	9b. ⁻	Taxes and certain other debts you	owe the government. (Copy line 6b.)		\$0.00		
	9c. (Claims for death or personal injury	while you were intoxic	cated. (Copy line 6c.)		\$0.00		
	9d. \$	Student loans. (Copy line 6f.)				\$9,779.00		
9e. Obligations arising out of a separation agreement or divorce that you did not report as \$0.00								
	prioi	rity claims. (Copy line 6g.)				\$0.00		
	9f. D	Debts to pension or profit-sharing p	plans, and other simila	r debts. (Copy line 6h.)		y0.00		
	9a. '	Total. Add lines 9a through 9f.				\$9 779 00		

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Fill in this	information to identify your case	se:				
Debtor 1	Rachael	М	Ticha	cek		
	First Name	Middle Nam	ne Last N	lame		
Debtor 2 (Spouse.	if filing) First Name	Middle Nam	ne Last N	lame		
United Sta	ates Bankruptcy Court for the:	Northern	District of II	linois State)		
Case nun (If known)	nber		(1	- State)		
Ott: -:-	- L F - mas 400 A /D					Check if this is an
	al Form 106A/B					amended filing
<u>Sche</u>	dule A/B: Prope	erty				12/1
category v responsib write your Part 1:	tegory, separately list and de where you think it fits best. E ble for supplying correct info name and case number (if k Describe Each Reside u own or have any legal or ea	e as complete and a rmation. If more spa nown). Answer every nce, Building, La	ccurate as possible ce is needed, attac question. nd, or Other Re	e. If two married people and the separate sheet to this eal Estate You Own c	re filing together, both are s form. On the top of any a or Have an Interest In	equally dditional pages,
1. Do you	No. Go to Part 2	quitable interest in an	ıy residence, bullal	ng, land, or similar prope	rty?	
	Yes. Where is the property?					
1.1	Street address, if available, o		/hat is the property Single-family home Duplex or multi-ur		the amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D:</i> nims Secured by Property.
			Condominium or condominium or condominium or condominium	ooperative	Current value of the entire property?	Current value of the portion you own?
	Number Street	7::0:1:	Land Investment propert Timeshare Other	у	Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	City State		J	in the property? Check	Check if this is co (see instructions)	
		Ļ	Debtor 1 only		_	
		F	Debtor 2 only Debtor 1 and Debt	or 2 only		
		F	₫	debtors and another		
		O pi	→ ther information you continue to the co	ou wish to add about this on number:	item, such as local	
If you	own or have more than one, list					
1.2	Street address, if available, o		/hat is the property Single-family home Duplex or multi-ur		the amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property.
			Condominium or of Manufactured or m	ooperative	Current value of the entire property?	Current value of the portion you own?
	Number Street City State	Zip Code	Investment propert Timeshare Other	у	Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
	ony State	, r	J	in the property? Check	Check if this is co (see instructions)	
		Ē	Debtor 2 only	or 2 only		

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

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Debtor 1	Rachael First Name	M Middle Name	Tichacek Case numbe	er (if known)	
1.3Stre	eet address, if available, or other	v 	What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property?	•
Nur City	nber Street State	Zip Code [Land Investment property Timeshare Other Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Describe the nature of interest (such as fee si the entireties, or a life Check if this is con (see instructions)	mple, tenancy by estate), if known.
		p n you own for a	At least one of the debtors and another Other information you wish to add about this item property identification number: Ill of your entries from Part 1, including any entries	es for pages	
Do you ov you own th 3. Cars, va	at someone else drives. If you leans, trucks, tractors, sport utility	ease a vehicle, als	n any vehicles, whether they are registered or not so report it on Schedule G: Executory Contracts and Ur ccles		
Ye 3.1			Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secure	laims or exemptions. Put ed claims on <i>Schedule D:</i> nims Secured by Property. Current value of the portion you own?
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secure	laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the portion you own?

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btor 1	Rachael First Name	M Middle Name	Tichacek Ci	ase number	(if known)		
2.2		ivildale name		2 Chook	Do not dodinat account of all	oimo or overnations. Dut	
3.3	Make Model:		Who has an interest in the property one.	r Check	Do not deduct secured of the amount of any secure	•	
	Year:		Debtor 1 only		•	Creditors Who Have Claims Secured by Propert	
	Approximate mileage:		Debtor 2 only			,	
	Other information		Debtor 1 and Debtor 2 only		Current value of the entire property?	Current value of the portion you own?	
	Other information:					——————	
			At least one of the debtors and anoth				
			Check if this is community proper instructions)	rty (see			
3.4	Make		Who has an interest in the property	? Check	Do not deduct secured cl		
	Model:		one.		the amount of any secure		
	Year:		Debtor 1 only		Creditors Who Have Cla	nims Secured by Proper	
	Approximate mileage:		Debtor 2 only		Current value of the	Current value of the	
	Other information:		Debtor 1 and Debtor 2 only		entire property?	portion you own?	
			At least one of the debtors and anoth	ier			
			Check if this is community prope	rty (see			
Exa			instructions) er recreational vehicles, other vehicles, t, fishing vessels, snowmobiles, motorcycle				
Exa	mples: Boats, trailers, motors		er recreational vehicles, other vehicles,	accessorie			
Exa	mples: Boats, trailers, motors No Yes Make		er recreational vehicles, other vehicles, t, fishing vessels, snowmobiles, motorcycle Who has an interest in the property	accessorie	Do not deduct secured cl	ed claims on <i>Schedule D</i>	
Exa	mples: Boats, trailers, motors No Yes Make Model:		er recreational vehicles, other vehicles, t, fishing vessels, snowmobiles, motorcycle Who has an interest in the property one.	accessorie	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on <i>Schedule D</i> ims Secured by Proper	
Exa	mples: Boats, trailers, motors No Yes Make Model: Year:		who has an interest in the property one. Debtor 1 only	accessorie	Do not deduct secured cl the amount of any secure	ed claims on <i>Schedule D</i>	
Exa	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:		who has an interest in the property one. Debtor 1 only Debtor 2 only	accessorie	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule D nims Secured by Proper Current value of the	
Exa	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage:		who has an interest in the property one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	accessorie Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	ed claims on Schedule De nims Secured by Proper Current value of the	
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information:		who has an interest in the property one. Debtor 1 only Debtor 2 only At least one of the debtors and anoth instructions) Who has an interest in the property one.	e accessorie Check Check Perty (see	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property? Do not deduct secured of	ed claims on Schedule Desims Secured by Proper Current value of the portion you own? aims or exemptions. Pu	
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model:		who has an interest in the property one. Debtor 1 and Debtor 2 only At least one of the debtors and anoth instructions) Who has an interest in the property one.	e accessorie Check Check Perty (see	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property? Do not deduct secured of the amount of any secure	ed claims on Schedule E nims Secured by Proper Current value of the portion you own?	
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year:		who has an interest in the property one. Debtor 1 only Debtor 2 only At least one of the debtors and anoth instructions) Who has an interest in the property one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 only	e accessorie Check Check Perty (see	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property? Do not deduct secured of	ed claims on Schedule E nims Secured by Proper Current value of the portion you own?	
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model:		who has an interest in the property one. Debtor 1 and Debtor 2 only At least one of the debtors and anoth instructions) Who has an interest in the property one.	e accessorie Check Check Perty (see	Do not deduct secured of the amount of any secure Creditors Who Have Cla Current value of the entire property? Do not deduct secured of the amount of any secure	ed claims on Schedule Desims Secured by Proper Current value of the portion you own? daims or exemptions. Pured claims on Schedule Desimals.	
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year:		who has an interest in the property one. Debtor 1 only Debtor 2 only At least one of the debtors and anoth instructions) Who has an interest in the property one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 only	e accessorie Check Check Perty (see	Do not deduct secured of the amount of any secure Creditors Who Have Classian Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classian Creditors Who Have Classian Control of the Amount of Control of Creditors Who Have Classian Control of Creditors Cr	ed claims on Schedule Edims Secured by Proper Current value of the portion you own? daims or exemptions. Puted claims on Schedule Edims Secured by Proper	
4.1	mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage:		who has an interest in the property one. Debtor 1 and Debtor 2 only At least one of the debtors and anoth instructions) Who has an interest in the property one. Debtor 1 and Debtor 2 only At least one of the debtors and anoth instructions) Who has an interest in the property one. Debtor 1 only Debtor 2 only	? Check erty (see ? Check	Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Class Current value of the	ed claims on Schedule Desirms Secured by Proper Current value of the portion you own? claims or exemptions. Pure ded claims on Schedule Desirms Secured by Proper Current value of the	

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Debtor 1	Rachael First Name	M Middle Name	Tichacek Last Name	Case number (if known)	
Dort 3:		our Personal and Househo			
		ave any legal or equitable ir		ollowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		and furnishings liances, furniture, linens, china, kitche	nuoro		
No Examp	леѕ. мајог арр	mances, rumnure, imens, china, kilone	riware		
	Describe	2 beds, couch, chair, 2 dressers, kitch	nen table		\$800.00
7. Elect Examp No		s and radios; audio, video, stereo, and	d digital equipment; computers	s, printers, scanners; music	
✓ Yes. [Describe	tv, computer, gaming system			\$400.00
	•	ue and figurines; paintings, prints, or othe in, or baseball card collections; other	•	•	
Yes. [Describe				
Examp	les: Sports, ph	orts and hobbies iotographic, exercise, and other hobby is; carpentry tools; musical instruments		oles, golf clubs, skis; canoes	7
10. Fire		es, shotguns, ammunition, and related	d equipment		
✓ No					
Yes. [Describe				
11. Clot Examp		clothes, furs, leather coats, designer v	vear, shoes, accessories		
	Describe	used clothing			\$200.00
12. Jewe Examp	•	ewelry, costume jewelry, engagement	rings, wedding rings, heirloon	n jewelry, watches, gems,	
✓ Yes. [Describe	used jewelry			\$150.00
Examp No	n-farm animal oles: Dogs, cat Describe	s, birds, horses]
44 8		and household from the state	at already list in already a	, hoolth old over all a set list	
14. Any ✓ No	otner persor	nal and household items you did no	ot aiready list, including any	, neaith aids you did not list	
	Describe]
		lue of all of your entries from Part number here			<u>\$1550.00</u>

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Deb	tor 1	Rachael First Name	M Middle Name	Tichacek Last Name	Case number (if known)	
Part	<u>4</u> ·	Describe Your F		Last Name		
			ny legal or equitable inte	erest in any of the fo	ollowing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Dep Exam	Yesvosits of money mples: Checking, sav	in your wallet, in your home, in a single in your home, in you	certificates of deposit; share	Cash:	
	✓	No Yes		Institution name:		
			17.1. Checking account:17.2. Checking account:17.3. Savings account:17.4. Savings account:	tcf bank		\$1.00
			17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account:			
18.	Exa		or publicly traded stocks vestment accounts with brokerage Institution or issuer name:	e firms, money market accou	unts	
19.	an L	n-publicly traded sto LC, partnership, a No Yes. Give specific information about them		ted and unincorporated I	% of ownership:	

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Deb	tor 1	Rachael	M	Tichacek	Case number (if known)	
20.			orate bonds and other negotia			
	Nor	n-negotiable instrume	nclude personal checks, cashiers' nts are those you cannot transfer			
		No Yes. Give specific information about them	Issuer name:			
21.		tirement or pension amples: Interests in IR		, thrift savings accounts, or c	ther pension or profit-sharing plans	
		No Van Lintanah	Type of account:	Institution name:		
	Ч	Yes. List each account	401(k) or similar plan:			
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			
			Additional account:			
			Additional account:			
22.	You Exa	amples: Agreements v npanies, or others	orepayments deposits you have made so that you with landlords, prepaid rent, public	utilities (electric, gas, water)	e from a company , telecommunications	
		No Yes	Florida	Institution name:		
	٢	103	Electric:	-		
			Gas: Heating oil:			
			Security deposit on rental unit:	security deposit on rental		\$850.00
			Prepaid rent:			
			Telephone:			·
			Water:			· -
			Rented furniture:			
			Other:			
23.			a periodic payment of money to y	rou, either for life or for a num	ber of years)	
		No Yes	Issuer name and description:			
						-

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Deni	or 1 Rachael	IVI NA:			number (if known)	
24.	First Name Interests in ar		Name Last Notes that I have a count in a qualified ABLE	earne E program, or under a quali	fied state tuition program	1.
	26 U.S.C. §§ 5	30(b)(1), 529A(b), and 529	(b)(1).			
	✓ No Yes	Institution name and descrip	otion. Separately file the rec	ords of any interests.11 U.S.C	5. § 521(c):	
25.	Trusts, equita exercisable fo		property (other than any	thing listed in line 1), and ri	ights or powers	
	✓ No					
	Yes. Desc	ribe				
26	Detents conv	rights, trademarks, trade	accusts and other intelle	atival muomontiv		
26.		net domain names, website	•			
	✓ No					
	Yes. Desc	ribe				
27.	Licenses, fran	 nchises, and other genera	l intangibles			
		_	_	on holdings, liquor licenses, p	professional licenses	
	✓ No	wilh o				
	Yes. Desc	nibe				
Mor	ney or prope	erty owed to you?				Current value of the
						portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds ov	ved to you				·
	No No	and the telephone of the c	2016 EIC Child tay gradit	, and american opportunity	Federal:	\$4016.00
	about	pecific information them, including whether	2016 anticipated tax refun	• • • • •	i cuciai.	ψ+010.00
	•	lready filed the returns ne tax years			State:	\$0.00
					Local:	\$0.00
29.	Family support		oousal support, child suppo	rt, maintenance, divorce settle	ment, property settlement	
	✓ No			.,		
	Yes. Give s	pecific information			Alimony:	\$0.00
					Maintenance:	\$0.00
					Support:	\$0.00
					Divorce settlement:	\$0.00
					Property settlement:	\$0.00
30.		s someone owes you aid wages, disability insuran	ce payments, disability ben	efits, sick pay, vacation pay, wo	orkers' compensation.	
		al Security benefits; unpaid			• • • • •	
	✓ No Vos Doseri	iho				
	Yes. Descri					

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Deb	otor 1	Rachael	M	Tichacek	Case number (if known)	
		First Name	Middle Name	Last Name		
31.		erests in insurance po		vinge coopyrat (LICA), are dit h		
	EX	ampies: nealth, disabilit	y, or life insurance, nealth sa	vings account (HSA), credit, r	nomeowner's, or renter's insurance	
	✓	No				
		Yes. Name the insurar	Com nce company	pany name:	Beneficiary:	Surrender or refund value:
		of each policy and list				
		. ,				_
						_
32.	۸n	v interest in property	that is due you from some	one who has died	· -	_
32.					or are currently entitled to receive	
		perty because someone		ao	c. a.o canonal common to receive	
		l Na				
	\leq	No				
		Yes. Describe				
22	CIA	nime against third par	tios whother or not you ba	ve filed a lawsuit or made a	domand for navment	
33.			loyment disputes, insurance		demand for payment	
		-	ioymoni diopatoo, incarance	olaimo, or rigino to odo		
	✓	No				
		Yes. Describe				
			<u></u>			
34.			nliquidated claims of every	nature, including counter	claims of the debtor and rights	
	το	set off claims				
	✓	No				
	П	Yes. Describe				
		_				
35.	An	y financial assets you	did not already list			
	✓	No				
	F	Yes. Describe				
		<u> </u>				
		-				
00						
36.			-	4, including any entries fo		\$4867.00
	101	rait 4. Wille that hun	11Del 11e1e			
		-				
Part	t 5 :	Describe Any Bu	ısiness-Related Prope	erty You Own or Have a	an Interest In. List any real estate	e in Part 1.
37.	Do	you own or have any	legal or equitable interest	in any business-related pro	perty?	
	~	No. Go to Part 6.				Current value of the
	F					portion you own?
		Yes. Go to line 38.				Do not deduct secured claims
	_					or exemptions
38.	Ac	counts receivable or o	commissions you already e	arned		
	✓	No				
	F	Yes. Describe				
39.		fice equipment, furnis				
	Exa	amples: Business-relate	ed computers, software, mode	ems, printers, copiers, fax mad	chines, rugs, telephones, desks, chairs, elect	ronic devices
	✓	No				
	Ė	Yes. Describe				
	ш	103. D0301DE				

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Deb	tor 1	Rachael	M Middle News	Tichacek	Case number (if known)	
40.	Mad	First Name Chinery, fixtures, eq	Middle Name uipment, supplies you	Last Name use in business, and tools of yo	our trade	
	_	No		, a 155.5 51 ye		
		Yes. Describe				
	_					
41.	Inve	entory				
		No				
	Ħ	Yes. Describe				1
	_					
42.	Inte	rests in partnersh	ips or joint ventures			
	✓	-				
	П	Yes. Give specific		Name of entity:	% of ownership:	
	_	information about				
		them				
43. (Cust	omer lists, mailing	lists, or other compilat	ions		
	✓	No				
		Yes. Do your lists in	clude personally identifial	ole information (as defined in 11 U.	S.C. § 101(41A))?	
		☐ No				
		Yes. Descr	ribe			
44.	Any	business-related p	property you did not alro	eady list		
	V	No				
	Ħ	Yes. Give specific		_		
		information		_		
			-	Part 5, including any entries for p		
		-				
Part	t 6:	If you own or have ar	n interest in farmland, list i	cial Fishing-Related Prop in Part 1.	erty You Own or Have an Interest	in.
46.	Do	you own or have a	ny legal or equitable in	terest in any farm- or commercia	al fishing-related property?	
	✓	No. Go to Part 7.				Current value of the
		Yes. Go to line 47.				portion you own? Do not deduct secured
						claims or exemptions
47.	Far	m animals				o. o.topuorio
	Exa	amples: Livestock, po	ultry, farm-raised fish			
	✓	No				7
		Yes. Describe				
			1			1

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Debto	or 1	Rachael	M Middle Name	Tichacek	Case number (if known)	
48.	Cro	First Name ps-either growing		Last Name		
40.			Of flatvested			
	널	No Van Danariha				
	Ш	Yes. Describe				
	-					
49.	Far	m and fishing equi	pment, implements, machinery,	fixtures, and tools of trad	e	
	✓	No				
		Yes. Describe				
50.	Fari	m and fishing supr	olies, chemicals, and feed			
	_	No				
	넘	Yes. Describe				
	Ш	res. Besonbe				
	=					
51.	Any	farm- and comme	rcial fishing-related property you	did not already list		
	✓	No				
		Yes. Describe				
	_					
EO A 4	ملة لما		II of your entries from Part 6, inc	udina anu antrica far nac	as very have attached	
			here			
Part 7	7:	Describe All Pr	operty You Own or Have a	n Interest in That You	ı Did Not List Above	
53. I			perty of any kind you did not alre			
	Exai	mples: Season ticket	s, country club membership			
	✓	No				
		Yes. Give specific				
		information				
54. Ad	ld th	ne dollar value of a	II of your entries from Part 7. Wri	te that number here	>	
Part 8	3:	List the Totals	of Each Part of this Form			
<i>EE</i> D	art 1	L. Total roal actata	line 2		_	
JJ. F 6	ait i	i. Total real estate,	III IG 2			
56. p a	art 2	total vehicles, line	e 5		<u> </u>	
57. Pa	rt 3	: Total personal an	d household items, line 15	\$1550.00		
58. Pa	ırt 4	: Total financial ass	sets. line 36		 ,	
				\$4867.00		
			elated property, line 45		<u> </u>	
60. P a	art 6	6: Total farm- and f	ishing-related property, line 52		<u></u>	
61. P a	art 7	7: Total other prope	erty not listed, line 54			
62. T o	otal	personal property.	Add lines 56 through 61	···· \$6417.00		± ¢6/17 00
			<u> </u>	\$6417.00	Copy personal property total ►	+ \$6417.00
						\$6417.00
63. To	tal o	of all property on S	Schedule A/B. Add line 55 + line 62			ψυ+17.00

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Fill in this information to identify your case:				
Debtor 1	Rachael First Name	M Middle Name	Tichacek Last Name	
Debtor 2 (Spouse, if fil	ing) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	
Case number (If known)	r		(State)	

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt		
1.	Which set of exemptions are you claimi	ng? Check one only, e	ven if your spouse is filing with you.	
You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)				
	You are claiming federal exemptions. 1	1 U.S.C. § 522(b)(2)		
2.	For any property you list on Schedule A	/B that you claim as e	exempt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: security deposit on rental Line from	\$850.00	\$850.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Schedule A/B: 22			
	Brief description: used clothing Line from Schedule A/B: 11	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No No No Yes. Did you acquire the property covery No Yes	/ 3 years after that for ca		

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Debtor 1 Rachael Tichacek Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$1.00 **✓** description: \$1.00 tcf bank 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$800.00 **V** description: \$800.00 2 beds, couch, chair, 2 100% of fair market value, up to any dressers, kitchen table applicable statutory limit Line from Schedule A/B: 06 Brief 735 ILCS 5/12-1001(b) \$400.00 **✓** description: \$400.00 tv, computer, gaming 100% of fair market value, up to any system applicable statutory limit Line from Schedule A/B: Brief 735 ILCS 5/12-1001(g)(1) \$3,524.00 **✓** description: \$3,524.00 2016 EIC, Child tax 100% of fair market value, up to any credit, and american applicable statutory limit opportunity Line from Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$492.00 description: \$492.00 2016 anticipated tax 100% of fair market value, up to any refund applicable statutory limit Line from Schedule A/B: 28 Brief 735 ILCS 5/12-1001(b) \$150.00 $\overline{}$ description: \$150.00 used jewelry 100% of fair market value, up to any

Line from

Schedule A/B:

12

applicable statutory limit

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Fill in	this information to identify your cas	e:				
Debte	or 1 Rachael	М	Tichacek			
	First Name	Middle Name	Last Name			
Debte	or 2					
(Spot	use, if filing) First Name	Middle Name	Last Name			
Unite	d States Bankruptcy Court for the:	Northern	District of Illinois			
_			(State)			
Case (If kno	number					
Off	icial Form 106D			1		Check if this is ar amended filing
Scl	hedule D: Credi	tors Who Ha	ive Claims Secui	red by Pro	perty	12/1
space			e are filing together, both are equa ne entries, and attach it to this forn			
1. I	Do any creditors have claims sec	ured by your property?				
	No. Check this box and submit	this form to the court with yo	our other schedules. You have nothing	g else to report on this fo	orm.	
	Yes. Fill in all of the information	below.				
Part '	1: List All Secured Claims	3				
2.	List all secured claims. If a credito	or has more than one secur	ed claim, list the creditor separately	Column A	Column B	Column C
	for each claim. If more than one cre much as possible, list the claims in	•	list the other creditors in Part 2. As g to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

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Fill	in this inform	ation to identify your cas	e:					
Del	otor 1	Rachael	M	Tichacek				
		First Name	Middle Name	Last Name				
	otor 2	E. AN	14° 1 11 11					
(Sp	ouse, if filing)	First Name	Middle Name	Last Name				
Uni	ted States Ba	ankruptcy Court for the:	Northern	District of Illinois				
Cor	se number			(State)				
	nown)							
Of	ficial F	orm 106E/F			_1	Che	eck if this is ar	n amended filing
			ditoro Who	Haya Unagaura	d Claima			
<u> </u>	neau	ie E/F: Cre	caltors who	Have Unsecure				12/15
party 106 that	y to any exe VB) and on are listed in es in the bo	cutory contracts or un Schedule G: Executor Schedule D: Creditor	expired leases that could r y Contracts and Unexpire s Who Hold Claims Secur	rs with PRIORITY claims and Paresult in a claim. Also list executed Leases (Official Form 106G). Dired by Property. If more space is this page. On the top of any additional states and the space is the space.	ory contracts on <i>Sch</i> o not include any cre needed, copy the Pa	edule A/B: editors with art you nee	Property (Of partially sec d, fill it out, n	fficial Form cured claims number the
Par	t1: List A	All of Your PRIORI	TY Unsecured Claims	<u> </u>				
1.	Do any cre	editors have priority ur	secured claims against yo	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, ident much as po Continuation	ify what type of claim it is pssible, list the claims in a on Page of Part 1. If more	 If a claim has both priority a alphabetical order according than one creditor holds a p 	ore than one priority unsecured clai and nonpriority amounts, list that cla to the creditor's name. If you have particular claim, list the other credito r this form in the instruction booklet.	im here and show both more than two priority rs in Part 3.	n priority and	nonpriority ar	mounts. As
						Total	Priority	Nonpriority

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Debto		hacek Case number (if known)	_
Part 2	List All of Your NONPRIORITY Unsecured Claims	<u>s</u>	
3.	Do any creditors have nonpriority unsecured claims against you	u?	
	No. You have nothing to report in this part. Submit this form to the	e court with your other schedules.	
'	✓ Yes.		
4.	— List all of your nonpriority unsecured claims in the alphabetical	order of the creditor who holds each claim. If a creditor has more t	han one priority
		claim listed, identify what type of claim it is. Do not list claims already in	
	f more than one creditor holds a particular claim, list the other creditor	rs in Part 3.If you have more than four priority unsecured claims fill out t	he Continuation
	Page of Part 2.		
			Total claim
4.1	CAB SERV	Last 4 digits of account number 4837	\$154.00
	Nonpriority Creditor's Name 60 BARNEY DR		
	Number Street	When was the debt incurred? 3/1/2016	
		As of the date you file, the claim is: Check all that apply.	
	IOLIET IIIiaaia CO404	Contingent	
	JOLIET Illinois 60434 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	✓ Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	-	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Collection; Collecting for	
	No	ORIGINAL CREDITOR:	
	☐ Yes	Other. Specify MINOOKA CCSD 201	
4.2	CHASE	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name PO Box 15298	When was the debt incurred?	
	Number Street	when was the dept incurred:	
		As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Wilmington Delaware 19850	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	<u>~</u>	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts	
	Is the claim subject to offset?	✓ Other. Specify bank fees	
	✓ No	_	
	Yes		
4.3	Chrysler Capital Nonpriority Creditor's Name	Last 4 digits of account number1000	\$18,404.00
	P.O. Box 961275	When was the debt incurred? 3/1/2015	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Fort Worth Texas 76161	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	<u> </u>	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	✓ Other. Specify	
	Yes		

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Debto	r 1 Rachael M First Name Middle Name	Tichacek Case number (if known)	
Don't (
Part 2			
	After listing any entries on this page, number them beg	ginning with 4.5, followed by 4.6, and so forth.	Total claim
4.4	City of Chicago Parking Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00
	121 N. LaŚalle St # 107A	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago Illinois 60602	Unliquidated	
	ChicagoIllinois60602CityStateZip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	Debtor 1 and Debtor 2 only	that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	─ debts✓ Other. Specify parking tickets	
	Is the claim subject to offset?	Suron opean) paining notice	
	Yes		
4.51	ComEd		A 4 000 00
4.5	Nonpriority Creditor's Name	Last 4 digits of account number	\$1,000.00
	3 Lincoln Center Number Street	When was the debt incurred?n/a	
	Bankruptcy Section	As of the date you file, the claim is: Check all that apply.	
	Balikiupicy Section	Contingent	
	Oakbrook Terrace Illinois 60181	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>utility</u>	
	✓ No		
	Yes		
4.6	Fed Loan Serv	Last 4 digits of account number 0002	\$6,279.00
	Nonpriority Creditor's Name Pob 69184	When was the debt incurred? 7/1/2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Harrisburg Pennsylvania 17106	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	✓ Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	Other. Specify	
	Yes		

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Debto		Tichacek Case number (if known)	
	First Name Middle Name	Last Name	
Part 2	Your NONPRIORITY Unsecured Claims - Cont	inuation Page	
	After listing any entries on this page, number them beginning	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.7	Fed Loan Serv Nonpriority Creditor's Name	Last 4 digits of account number0001	\$3,500.00
	Pob 69184 Number Street	When was the debt incurred? 7/1/2014	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Harrisburg Pennsylvania 17106 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	✓ Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	Other. Specify	
	Yes		
4.8	I C SYSTEM INC	Last 4 digits of account number 1001	\$67.00
	Nonpriority Creditor's Name PO BOX 64378	When was the debt incurred? 11/1/2014	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	SAINT PAUL Minnesota 55164	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	✓ No	✓ 001 Collection; Collecting for ORIGINAL CREDITOR:	
	Yes	Other. Specify BUSCHBACH INS AGENCY	
4.9	Illinois Tollway	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name 2700 Ogden Ave	When was the debt incurred?	
	Number Street		
	Legal Dept	As of the date you file, the claim is: Check all that apply. Contingent	
		Unliquidated	
	Downers GroveIllinois60515CityStateZip Code	— =	
	Who incurred the debt? Check one.	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Debtor 1 only Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts debts	
	Is the claim subject to offset?	✓ Other. Specify tollway tickets	
	✓ No		
	Yes		

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Debtor 1 Rachael М Tichacek Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. Total claim 4.10 MERCHANTS CREDIT GUIDE \$596.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? 8/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify_ MEDICAL PAYMENT DATA Yes MERCHANTS CREDIT GUIDE 4.11 \$399.00 Last 4 digits of account number 1117 Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? 1/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |~| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for |~| **✓** No ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA | Yes 4.12 MERCHANTS CREDIT GUIDE \$375.00 Last 4 digits of account number _ Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: **✓ ✓** No

Yes

Other. Specify

MEDICAL PAYMENT DATA

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Debtor 1 Rachael М Tichacek Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 MERCHANTS CREDIT GUIDE \$375.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Illinois Chicago 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for ORIGINAL CREDITOR: **V ✓** No Other. Specify_ MEDICAL PAYMENT DATA Yes PORTFOLIO RC 4.14 \$482.00 Last 4 digits of account number 7959 Nonpriority Creditor's Name When was the debt incurred? 120 Corporate Boulevard Number Street As of the date you file, the claim is: Check all that apply. Contingent 23502 Norfolk Virginia Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Collection; Collecting for |~| **✓** No ORIGINAL CREDITOR: 08 Other. Specify **COMENITY BANK** Yes 4.15 PORTFOLIO RC \$184.00 Last 4 digits of account number _ 6774 Nonpriority Creditor's Name 120 Corporate Boulevard When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Virginia 23502 Norfolk Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No

Yes

Other. Specify

ORIGINAL CREDITOR: 08

SYNCHRONY BANK

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Debtor		ichacek Case number (if known)				
	First Name Middle Name Las	ast Name				
Part 2:	Your NONPRIORITY Unsecured Claims - Contin	nuation Page				
	After listing any entries on this page, number them beginnin	•	Total claim			
4.16	VERIZON WIRELESS Nonpriority Creditor's Name	Last 4 digits of account number	\$727.00			
	PO BOX 4002 Number Street	When was the debt incurred? 3/1/2011				
	Number Street	As of the date you file, the claim is: Check all that apply.				
	Acworth Georgia 30101	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify 001 UnknownLoanType				
	✓ No	Other. Specify				
	Yes					
4.17	VERIZON WIRELESS	Last 4 digits of account number	\$727.00			
	Nonpriority Creditor's Name PO BOX 4002	When was the debt incurred? 3/1/2011				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	Acworth Georgia 30101	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar				
	Is the claim subject to offset?	debts				
	✓ No	✓ Other. Specify 001 UnknownLoanType				
	Yes					

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Debtor 1	Rachael First Name	M Middl	e Name	Tichacek Last Name	Case num	ber (if known)
Part 3:	List Others to E				ted	
col age you	llection agency is try	ing to collect fro f you have more	m you for a debt yo than one creditor fo	u owe to someone or or any of the debts t debts in Parts 1 or 2	else, list the origin hat you listed in l 2, do not fill out o	. C
	ame			•	_	lid you list the original creditor?
	D Box 182124 Jumber Street			Line 4 <u>.14</u>	of (Check one):	Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Co	olumbus	Ohio	43218	Last 4 digits of ac	count number	7959
Ci	ty	State	Zip Code			

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Tichacek Rachael Debtor 1 Case number (if known) First Name Middle Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that 6d. amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$9,779.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h.

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

\$25,590.00

\$35,369.00

6j.

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Fill in this information to identify your case:				
Debtor 1	Rachael	M	Tichacek	
ı	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	
Case number (If known)			(State)	

Official	Form	106G
-	. •	

Check if this is ar
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or compan	y with whom you have th	e contract or lease	State what the contract or lease is for			
2.1	Kozak, Mary Name 707 Wilcox St			Other, Other, Month to month lease			
	Number	Street					
	Joliet City	Illinois State	60435 Zip Code				

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Fill in this infor	mation to identify your cas	Se:		
Debtor 1	Rachael	M	Tichacek	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois	
Crimou Charco I	carriagetoy occurror and		(State)	-
Case number				
(If known)				
				Check if this is an
Ott: -: -1	Tamas 40011			amended filing
Official	Form 106H			
Schedu	le H: Your C	odebtors		12/15
				plete and accurate as possible. If two married people are filing
entries in the b	oxes on the left. Attach			eeded, copy the Additional Page, fill it out, and number the dditional Pages, write your name and case number (if known).
Answer every o	luestion.			
1. Do you ha	ive any codebtors? (If y	ou are filing a joint case, do	not list either spouse as a code	ebtor.)
✓ No				
Yes				
2. Within the	e last 8 years, have you	lived in a community proj	perty state or territory? (Con	nmunity property states and territories include Arizona, California,
		tico, Puerto Rico, Texas, Wa	• • •	
✓ No. 0	Go to line 3.			
Yes.	Did your spouse, former s	spouse, or legal equivalent liv	e with you at the time?	
✓	No			
	Yes. In which community	state or territory did you live?	Fill in t	he name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equiv	ralent ralent	_
				_
	Number Street			
	C't.	Ctata	7in Onda	_
	City	State	Zip Code	
3. In Column	1, list all of your codel	btors. Do not include vou	spouse as a codebtor if vo	ur spouse is filing with you. List the person shown in line 2
again as a	codebtor only if that p	erson is a guarantor or co	osigner. Make sure you have	listed the creditor on Schedule D (Official Form 106D),
Schedule	E/F (Official Form 106E	E/F), or Schedule G (Official	al Form 106G). Use <i>Schedul</i> e	e D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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Debtor 1 Rachael M Trichack First Name Middle Name Last Name Debtor 2 (Sposes, if tiling) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) A supplement showing post-petition chapte expenses as of the following date:						
Check if this is: Chec	Fill in this information to identif	fy your case:				
Debtor 2 Check fill in Sirist Name Middle Name Last Name Middle Name Middle Name Middle Name Name Middle Name Middle Name Middle Name Middle Name					_	
Spouse. If filing) First Name Middle Name Last Name An amended filing An a		Mildule Name	Lastiname			Check if this is:
Case number (Iknown)		Middle Name	Last Name		_	An amended filing
Case number (Irknown) Official Form 106l Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is livin with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment information. If you have more than one job, attach a separate page with information. If you have more than one gentle page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 For Debtor 2 or non-filing spouse and commissions (before all payroll 2. Sezasono)	United States Bankruptcy Court for the:	Northern	_		_	
Describe Employment 1. Fill in your employment information. Be aparate page with information about definition about student or homemaker, if it applies. Describe Employer's address and response in a place of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse and the report or any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you are married and not filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employeds. Occupation Employer's address Employer's direct Boilingbrook illinois 60440 City State Zip Code 1 year 4 months Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below, if you need more space, attach a separate sheet to this form. 2. List monthly gross wages, salary, and commissions (before all payrol) 2. \$2,380.00			(State)		_	· · · · · · · · · · · · · · · · · · ·
Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is livin with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment I. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employeds. Employer's name Employer's name Employer's address Employer's address Alistar Smilles Employer's address Employer's address Employer's address Employer's address Boilingbrook Illinois 60440 City State Zip Code City State Zip Code Type Code T	(If known)					MM / DD / YYYY
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is livin with you, include information about your spouse. If you are separated and your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employer's name Debtor 1	Official Form 106l					
equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is livin with you, include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Employment status Debtor 1 Employed Debtor 2 Employed Not Employed Not Employed Not Employed Occupation Employer's name Employer's address Employer's name Employer's name Employer's address Employer's a	Schedule I: Your Inc	come				
In Fill myour employment information. If you have more than one job, attach a separate page with information about additional employers. Include part time, seasonal, or self-employed work. Occupation Employer's address Include part time, seasonal, or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Bolingbrook Illinois 60440 City State Zip Code City State Zip Code 1 year 4 months Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$2,380.00	additional pages, write your n	ame and case number				
Employment status Employed Employed Employed Mot Employer Mot Employer Mot Employed Mot Employed Mot Employed Mot Employer Mot Employer Mot Employer Mot Employed Mot Employed Mot Employer Mot Employe	Fill in your employment		Debtor 1			Debtor 2
If you have more than one job, attach a separate page with information about additional employers. Employer's name Employer's name Employer's address or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. Estimate monthly gross wages, salary, and commissions (before all payroll 2. \$2,380.00	information.	Employment status	Z Employed			T Employed
information about additional employers. Include part time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Bolingbrook Illinois 60440 City State Zip Code City S	job,			ed		
Include part time, seasonal, or self-employed work. Cocupation may include student or homemaker, if it applies. Bolingbrook Illinois 60440 City State Zip Code City State Zip Code How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$2,380.00		Occupation				_
or self-employed work. Occupation may include student or homemaker, if it applies. How long employed there? Bolingbrook Illinois 60440 City State Zip Code City State Zip Code 1 year 4 months For Debtor 1 For Debtor 2 or non-filing spouse 1 years 2 or non-filing spouse 1 years 2 or non-filing spouse For Debtor 1 For Debtor 2 or non-filing spouse 1 years 2 or non-filing spouse 1 years 2 or non-filing spouse 2 years 3 or non-filing spouse 3 years 4 months 1 years 4 months 2 years 4 months 3 years 4 months 4 years 4 months 4 years 4 months 4 years 4 months 5 years 4 months 5 years 4 months 5 years 4 months 5 years 4 months 6 years 4 months 1 years 4 months 1 years 4 months 1 years 4 months 2 years 4 months 1 years 4 months 2	employers.	Employer's name	Allstar Smiles			
Occupation may include student or homemaker, if it applies. Bolingbrook Illinois 60440 City State Zip Code City State Zip Code	or	Employer's address				Number Street
Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payrol) 2. \$2,380.00	Occupation may include					_
How long employed there? 1 year 4 months 1	or homemaker, if it applies.					City State Tip Code
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse 2. List monthly gross wages, salary, and commissions (before all payroll 2. \$2,380.00					ZIP Code	State Zip Code
geguctions.) It not paid monthly calculate what the monthly wage would be.	Estimate monthly income as of the you are separated. If you or your non-filing spouse have m attach a separate sheet to this form. 2. List monthly gross wages, sala	e date you file this form. If you ore than one employer, comb	ine the information for th	r all employe	ers for that person	on on the lines below. If you need more space,
, , , , , , , , , , , , , , , , , , , ,	, , ,				+ \$0.00	

\$2,380.00

4. Calculate gross income. Add line 2 + line 3.

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Debto	r 1 Rachael	Middle News	Last Name	Case number	(if known)	
	First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Cop	y line 4 here		→ 4	\$2,380.00		
5. List	all payroll deductions:					
5a.	Tax, Medicare, and Soc	cial Security deductions	5a	\$307.72		
5b.	Mandatory contributio	ns for retirement plans	5b	\$0.00		
5c.	Voluntary contribution	s for retirement plans	5c	\$0.00		
5d.	Required repayments	of retirement fund loans	5d	\$0.00		
5e.	Insurance		5e	\$0.00		
5f. l	Domestic support obli	gations	5f	\$0.00		
5g.	Union dues		5g	\$0.00		
5h.	Other deductions. Spe	cify:	5h. + _	\$0.00 +	·	
6. Add +5h.	the payroll deductions	s. Add lines 5a + 5b + 5c + 5d + 5e +5f	f + 5g 6	\$307.72		
7. Cald	culate total monthly tak	e-home pay. Subtract line 6 from line	4. 7. <u> </u>	\$2,072.28		
8. List	all other income regula	arly received:				
	business, profession,	Il property and from operating a or farm ach property and business showing gro	00			
		cessary business expenses, and the to		\$0.00		
8b.	Interest and dividends	i	8b	\$0.00		
	dependent regularly re		ra			
	divorce settlement, and p	• •	8c	\$0.00		
	Unemployment compe	ensation	8d	\$0.00		
	Social Security		8e	\$200.00		
 	Include cash assistance a assistance that you receive	stance that you regularly receive nd the value (if known) of any non-cash re, such as food stamps (benefits under on Assistance Program) or housing				
;	Specify:		8f	\$0.00		
8g.	Pension or retirement	income	8g	\$0.00		
8h.	Other monthly income	. Specify:	8h. +	\$0.00 +		
9. Add	all other income Add li	nes 8a + 8b + 8c + 8d + 8e + 8f +8g +	8h. 9	\$200.00		
	culate monthly income d the entries in line 10 for	. Add line 7 + line 9. Debtor 1 and Debtor 2 or non-filing sp	ouse 10.	\$2,272.28 +		= \$2,272.28
Incl rela	lude contributions from an atives.	tributions to the expenses that you unmarried partner, members of your h already included in lines 2-10 or amour	ousehold, your deper	ndents, your roommates	•	
Spe	ecify:					11. + \$0.00
		st column of line 10 to the amount in the street of Schedules and Statistical Sur				12. \$2,272.28
****	Carris and Grant Grant Grant	, s. seriessies and statistical dar	S. Sonam Elak		, 	Combined monthly income
13. Do	you expect an increase	e or decrease within the year after y	ou file this form?			
	Yes. Explain:					

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Fill in this info	mation to identify	ir coco:				
Fill in this infor	mation to identify you	ur case:				
Debtor 1	Rachael First Name	M Middle Name	Tichacek Last Name			
Debtor 2	riistivame	Middle Name	Last Name	Check if this is:		
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filin	a	
United States F	Bankruptcy Court for	the: Northern	District of Illinois	A supplement sh	•	ion chanter 12
Ormod Otatoo E	Samuaptoy Countries	uio. <u>Itolaioiii</u>	(State)	expenses as of the		
Case number (If known)						
				MM / DD / YYYY	(
Official	Form 106	J				
Schedu	le J: Your	 Expenses				12/15
information. If (if known). Ans						umber
1. Is this a join	nt case?					
✓ No. Go	to line 2					
Yes. D	oes Debtor 2 live ir	n a separate household?				
Г г	No					
	Yes. Debtor 2 mu	ust file Official Forms 106J-2, Expen	ses for Separate Household of Debto	or 2.		
2. Do you hav dependents?	re [No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Do not list D Debtor 2.	_	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age	Does depen with you? No. Yes.	dent live
	d your	✓ No Yes			_	
Part 2: Esti	mate Your Ongo	oing Monthly Expenses				
-	of a date after the k	our bankruptcy filing date unless poankruptcy is filed. If this is a sup		•	•	
	•	non-cash government assistance ded it on <i>Schedule I: Your Income</i>	-		Yo	our expenses
	or home ownership or the ground or lot. 4	p expenses for your residence. In	clude first mortgage payments and		4.	\$850.00
If not incl	uded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Proper	ty, homeowner's, or	renter's insurance			4b.	\$0.00
4c. Home	maintenance, repair,	and upkeep expenses			4c.	\$0.00
4d. Home	owner's association o	or condominium dues			4d.	\$0.00

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Debtor 1 Rachael Tichacek Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$300.00 6a. 6b. Water, sewer, garbage collection \$75.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$300.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$560.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$25.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$200.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Rachael	M	Tichacek	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
22. Calcu	late your monthly expenses	s.				\$2,410.00
22a. <i>F</i>	Add lines 4 through 21.					\$0.00
22b. 0	Copy line 22 (monthly expense	s for Debtor 2), if any, fro	m Official Form 106J-2			\$2,410.00
22c. A	add line 22a and 22b. The resu	lt is your monthly expens	ses.		22.	
23.Calcu	late your monthly net incon	ne.				
23a. C	Copy line 12 (your combined m	onthly income) from Sch	edule I.		23a	\$2,272.28
23b. C	Copy your monthly expenses fro	om line 22 above.			23b	\$2,410.00
23c S	Subtract your monthly expenses	s from your monthly inco	me			
	The result is your monthly net	•	110.		23c	(\$137.72)
24. Do yo	ou expect an increase or dec	crease in your expens	es within the year after you	file this form?		
	example, do you expect to finisl gage payment to increase or c					
√ 1	No					
	/oo					
ш	⁄es					
	Explain here:					

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Fill in this information to identify your case:							
Debtor 1	Rachael	M	Tichacek				
ı	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing	First Name	Middle Name	Last Name				
United States B	ankruptcy Court for the:	Northern	District of Illinois				
Case number (If known)			(State)				

Official Form 106Dec

Check if this is a
amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Under penalty of perjury, I declare that I have read the summary are that they are true and correct.	nd schedules filed with this declaration and						
×	/s/ Rachael Tichacek	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 10/28/2016	Date						
	MM/DD/YYYY	MM/DD/YYYY						

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Fill in this									
Debtor 1	Rachae	el	M		Tichacek				
	First Na	ame	Middle 1	Name	Last Nam	ne			
Debtor 2									
(Spouse,	, if filing) First Na	ame	Middle I	Name	Last Nam	ne			
United S	tates Bankrupto	y Court for the:	Northern		District of Illino	-			
Case nu	mher				(Stat	te)			
(If known									
	ial Form								Check if this is amended filing
State	ement of	Financ	ial Affairs	s for l	<u>ndividua</u>	als Filin	g for Ba	ankruptcy	12/
space is question Part 1:		·	eet to this form. O	·	•		your name and	d case number (if	known). Answer every
1. W	/hat is your cu	rrent marital st	tatus?						
		Tent mantai si	iatus :						
	Morriad								
<u> </u>	Married								
Ľ Z	Not married								
2. D	Not married	years, have yo	ou lived anywhere	other than	where you live	now?			
2. D	Not married uring the last 3	years, have yo	ou lived anywhere	other than	where you live	enow?			
2. D	Not married uring the last 3		•		-				
2. D	Not married uring the last 3		ou lived anywhere		-				
2. D	Not married uring the last 3		•	ears. Do not	-				Dates Debtor 2 lived there
2. D	Not married uring the last 3 No Yes. List all of		•	ears. Do not	include where y	ou live now. Debtor 2:	s Debtor 1		
2. D	Not married uring the last 3 No Yes. List all of Debtor 1:		•	ears. Do not	include where y	ou live now. Debtor 2:	s Debtor 1		there
2. D	Not married uring the last 3 No Yes. List all of	f the places you	•	ears. Do not	include where y	ou live now. Debtor 2:			there
2. D	Not married uring the last 3 No Yes. List all of Debtor 1:	f the places you	•	Dates De there	include where y	Debtor 2:			there Same as Debtor 1
2. D	Not married uring the last 3 No Yes. List all of Debtor 1: 31 Central Number Stre	the places you	lived in the last 3 ye	Dates De there	ebtor 1 lived	Debtor 2:			there Same as Debtor 1 From
2. D	Not married uring the last 3 No Yes. List all of Debtor 1:	f the places you	•	Dates De there	ebtor 1 lived	Debtor 2:		Zip Code	there Same as Debtor 1 From
2. D	Not married uring the last 3 No Yes. List all of Debtor 1: 31 Central Number Stre Minooka	the places you	lived in the last 3 ye	Dates De there	ebtor 1 lived	Debtor 2: Same as Number Stree	eet	Zip Code	there Same as Debtor 1 From
2. D	Not married uring the last 3 No Yes. List all of Debtor 1: 31 Central Number Stre Minooka	the places you	lived in the last 3 ye	Dates De there	ebtor 1 lived	Debtor 2: Same as Number Stree	State	Zip Code	there Same as Debtor 1 From To
2. D	Not married uring the last 3 No Yes. List all of Debtor 1: 31 Central Number Stre Minooka	et Illinois State	lived in the last 3 ye	Dates De there	ebtor 1 lived	Debtor 2: Same as Number Stree	State S Debtor 1	Zip Code	there Same as Debtor 1 From To
2. D	Not married uring the last 3 No Yes. List all of Debtor 1: 31 Central Number Stre Minooka City	et Illinois State	lived in the last 3 ye	Dates De there From 01 To 12	ebtor 1 lived	Debtor 2: Same as Number Stree City Same as	State S Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1
2. D	Not married uring the last 3 No Yes. List all of Debtor 1: 31 Central Number Stre Minooka City	et Illinois State	lived in the last 3 ye	Dates Dethere From 01/2 From	ebtor 1 lived	Debtor 2: Same as Number Stree City Same as	State S Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From From

✓ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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Deb	tor 1			nacek Ca Name	ase number (if known)			
Dart	2.	Explain the Sources of Your		Name				
	Did Fill i	you have any income from employmenthe total amount of income you receivables. If you are filing a joint case and you No Yes. Fill in the details.	nent or from operating a led from all jobs and all bus	inesses, including part-time	e	rears?		
			Debtor 1		Debtor 2	Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions an exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
		rom January 1 of current year until ne date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips ☐ Operating a business	\$21741.47	Wages, commissions, bonuses, tips Operating a business			
		or last calendar year: lanuary 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$26339.00	Wages, commissions, bonuses, tips Operating a business			
		or the calendar year before that: lanuary 1 to December 31, 2014) YYYY	Wages, commissions, bonuses, tips Operating a business	\$12286.00	Wages, commissions, bonuses, tips Operating a business			
 	nclui cene case	you receive any other income during de income regardless of whether that income; if payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples nterest; dividends; money o together, list it only once un	of other income are alimor collected from lawsuits; royal der Debtor 1.	alties; and gambling and lottery win			
			Debtor 1		Debtor 2			
			Sources of income Describe below.	Gross income fro each source (before deductions exclusions)	Describe below.	Gross income from each source (before deductions and exclusions)		
		From January 1 of current year until he date you filed for bankruptcy:	SSI for son	\$2,000.00				
		For last calendar year: January 1 to December 31, 2015) YYYYY	ssi for son	\$2,400.00				
		For the calendar year before that: January 1 to December 31, 2014) YYYYY	ssi for son	\$2,400.00				

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btor 1	Rach First N		M Middle Name	Tichacek Last Name	Case numb	per (if known)			
rt 3:	List	Certain Paymen	ts You Made B	efore You Filed for	Bankruptcy				
Are	either	Debtor 1's or Debto	r 2's debts primar	rily consumer debts?					
_	No. N		Debtor 2 has prin	narily consumer debts.	Consumer debts are defined	in 11 U.S.C. § 101(8) as "inco	urred by an individual		
	D	uring the 90 days befo	ore you filed for ban	kruptcy, did you pay any cre	editor a total of \$6,425* or mo	ore?			
		No. Go to line 7.							
	Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.								
	*	Subject to adjustment	on 4/01/19 and eve	ery 3 years after that for cas	es filed on or after the date o	of adjustment.			
✓	Yes. D	ebtor 1 or Debtor 2	or both have prin	narily consumer debts.					
	D	uring the 90 days befo	ore you filed for ban	kruptcy, did you pay any cre	editor a total of \$600 or more	?			
	·	No. Go to line 7.							
Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.									
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
	Credit	or's Name					☐ Mortgage ☐ Car		
	Numb	er Street	_				Credit card Loan repayment		
	City	State	Zip Code				Suppliers or vendors		
-	Credit	or's Name					☐ Other ☐ Mortgage ☐ Car		
	Numb	er Street					Credit card Loan repayment		
	City	State	Zip Code				Suppliers or vendors Other		
	Credit	or's Name					Mortgage		
		er Street					Car Credit card Loan repayment		
	City	State	Zip Code				Suppliers or vendors		
	-						Other		

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Debtor 1	Rachael First Name	M Middle Name		chacek st Name	Case number (if known)
Insid corp ager	lers include your relat orations of which you	ou filed for bankruptcy, di tives; any general partners; are an officer, director, per business you operate as a l alimony.	relatives of any son in control, or	general partners; par r owner of 20% or mo	tnerships of which y ore of their voting se	ou are a general partner; curities; and any managing
✓	No Yes. List all payment	s to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
_	City Sta	ate Zip Code				
	Insider's Name					
	Number Street					
	City Sta	ate Zip Code				
insid Includ	ler? de payments on debt No	u filed for bankruptcy, die s guaranteed or cosigned b s that benefited an insider.		payments or trans	fer any property o	n account of a debt that benefited an
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
	Insider's Name					
	Number Street					
_	City Sta	ate Zip Code				
	Insider's Name					
	Number Street					
	City Sta	ate Zip Code				

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Deb	tor 1			M	Tichacek		Case number (if	known)	
		First Name		Middle Name	Last Name				
Part	4:	Identify Legal	Actions, R	epossession	s, and Foreclosure	s			
	List a				you a party in any lawsu all claims actions, divorce				ng? r custody modifications, and
		No Yes. Fill in the deta	ils.						
				Nat	ure of the case	Court or a	agency		Status of the case
		Case title							Pending
						Court Nan	ne		On appeal
		Case number				NumberSt	reet		Concluded
						T tall bol of			_
						City	State	Zip Code	
		Case title				0.1,	-	p	Pending
						Court Nan	ne		On appeal
		Case number							Concluded
						NumberSt	reet		
						City	State	Zip Code	
						Oity	Claic	Zip Code	
		No. Go to line 11. Yes. Fill in the info	ormation below		Describe the property 2015 Jeep Patriot 50			Date 08/2016	Value of the property
		Chrysler Capital Creditor's Name			-				
		P.O. Box 961275			Explain what happe	ened			
		Number Street			=				
					✓ Property was re	possessed.			
					Property was for				
		Fort Worth	Texas	76161	Property was ga				
		City	State	Zip Code	Property was att		or levied.		
					Describe the prope	erty		Date	Value of the property
		Craditaria Nassa			-				
		Creditor's Name			Explain what happe	ened			
		Number Street							
					Property was re	possessed.			
					Property was for				
					Property was ga				
		City	State	Zip Code	Property was att	ached, seized,	or levied.		

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Deb	tor 1	Rachael First Name	M Middle Name	Tichacek Last Name	Case number (if known)			
		Filst Name	Middle Name	Last Name				_
11.			filed for bankruptcy, did a a payment because you o	ank or financial institution, s	et off any amour	nts from your		
	✓	No Yes. Fill in the details.						
				Describe the action the	e creditor took	Date action was taken	Amount	
		Creditor's Name						
		Number Street						
				Last 4 digits of account n	umber: XXXX-			
		City State	e Zip Code					
			·					
12.			ed for bankruptcy, was an dian, or another official?	y of your property in the	possession of an assignee f	or the benefit of o	creditors, a court-	
	✓	No						
		Yes						
Part	5:	List Certain Gifts a	nd Contributions					
13.	Wi	thin 2 years before you	filed for bankruptcy, did y	ou give any gifts with a to	otal value of more than \$600	per person?		
	✓	l No	, ,, ,	0 ,0				
	Ě	Yes. Fill in the details for	r each gift.					
	-	Gifts with a total value per person	of more than \$600	Describe the gifts		Dates you gave the gifts	Value	
		Person to Whom You Ga	ve the Gift					
		Number Street						
		City State	e Zip Code					
		Person's relationship to y	you					
		Person to Whom You Ga	ve the Gift					
		Number Street						
		City State	e Zip Code					
		Person's relationship to y	you					

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Deb	tor 1	Rachael First Name	M Middle Name	Tichacek Last Name	Case number (if known)		
14.	Wit	hin 2 years before you fil	led for bankruptcy, did	you give any gifts or contribu	utions with a total value of	more than \$600	o any charity?
	✓	No					
	Ш	Yes. Fill in the details for e	each gift or contribution.				
		Gifts or contributions t that total more than \$6		Describe what you contr	ibuted	Date you contributed	Value
		Charity's Name					
		Number Street					
		City State	Zip Code				
Part	6.	List Certain Losses					
15.		nin 1 year before you file abling? No Yes. Fill in the details.	d for bankruptcy or sin	ce you filed for bankruptcy, c	lid you lose anything beca	use of theft, fire,	other disaster, or
	_	Describe the property y how the loss occurred	ou lost and	Describe any insurance Include the amount that inspending insurance claims (A/B: Property.	urance has paid. List	Date of your loss	Value of property lost
		ut seeking bankruptcy o de any attorneys, bankrup No Yes. Fill in the details.		cy petition? credit counseling agencies for s	ervices required in your bank	ruptcy.	
				Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
		Semrad Law Firm		Attorney's Fee - 0.00		10/28/2016	\$0.00
		Person Who Was Paid					
		20 S. Clark Street Number Street					
		28th Floor					
			00000				
		Chicago Illinoi City State					
		Email or website address	<u> </u>				
		None Person Who Made the Pa	avment if Not You				
		reison who made the ra	ayment, ii Not 10a				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address	·				
		Person Who Made the Pa	ayment, if Not You				

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Debt	or 1	Rachael	M	Tichacek	Case number (if known	n)	
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed by you deal with your credite not include any payment or tra No Yes. Fill in the details.	ors or to make paymen		our behalf pay or transfe	any property to a	nyone who promised to
	ш	res. I ili ili tile detalis.				_	
				Description and value or transferred	f any property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid					
		Number Street					
		0.7	7'- 0-1-				
		City State	Zip Code				
		sfers that you have already lis No Yes. Fill in the details.	ocu on una statement.	Description and value o	f any Describe a	ny property or	Date
				property transferred		eceived or debts	
		Person Who Received Trans	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
		Person Who Received Train	nsfer				
		Number Street					
		City State Person's relationship to you	Zip Code u				
19.		hin 10 years before you file ese are often called asset-pro		ou transfer any property to	a self-settled trust or sim	ilar device of whic	h you are a beneficiary?
	✓	No Yes. Fill in the details.					
	_			Description and value	of the property transferre	d	Date transfer was made
		Name of trust					

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Debt	or 1	Rachael First Name	M Middle Name	Tichacek Last Name	Case number (if known)	
Part	ρ.			ruments, Safe Deposit Bo	aves and Storage Units	
20.	With	nin 1 year before you file		•	ruments held in your name, or f	or your benefit, closed, sold,
	Inclu	ved, or transferred? ade checking, savings, mon peratives, associations, and			osit; shares in banks, credit unions,	brokerage houses, pension funds,
		No Yes. Fill in the details.				
				Last 4 digits of account number	Type of account or instrument	Date Last balance account was before closed, sold, moved, or transfer transferred
		CHASE Person Who Was Paid		XXXX-0000	✓ Checking Savings	08/2016 \$ -100.00
		Number Street			Money market Brokerage Other	
		City State	Zip Code		Outer	
		Person Who Was Paid		XXXX-	Checking Savings	
		Number Street			Money market Brokerage	
					Other	
		City State	Zip Code			
21.		you now have, or did you er valuables?	ı have within 1 year b	efore you filed for bankruptcy, a	ny safe deposit box or other de	pository for securities, cash, or
	✓	No				
		Yes. Fill in the details.				
				Who else had access to it?	Describe the conte	ents Do you still have it?
		Name of Financial Institut	tion	Name		☐ No ☐ Yes
		Number Street		Number Street		_
				City State Zi	Code	
		City State	Zip Code			
22.	Hav	e you stored property in	a storage unit or place	ce other than your home within	1 year before you filed for bankı	ruptcy?
		No Yes. Fill in the details.				
				Who else had access to it?	Describe the conte	ents Do you still have it?
		Name of Storage Facility		Name		☐ No ☐ Yes
		Number Street		Number Street		
				City State Zip	Code	
		City State	Zip Code			

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ebtor	1 Rachael M First Name Middle Name	Last Name Case	e number (if known)	
rt 9:	Identify Property You Hold or Cont	rol for Someone Else		
. D	o you hold or control any property that some	one else owns? Include any property you b	orrowed from, are storing for, or hold i	n trust for
S	omeone.			
Ī.	? No			
	Yes. Fill in the details.			
		Where is the property?	Describe the contents	Value
		- -		
	Owner's Name	Number Street		
	Number Street			
		City State Zip Code		
	City State Zip Code			
rt 10	Give Details About Environmental	Intermation		
or the	purpose of Part 10, the following definitions apply	y:		
•	Environmental law means any federal, state, or lo	ocal statute or regulation concerning pollution, c	contamination, releases of	
	hazardous or toxic substances, wastes, or materi			
	including statutes or regulations controlling the cl	leanup of these substances, wastes, or materia	al.	
	Site means any location, facility, or property as de		now own, operate, or utilize it	
	or used to own, operate, or utilize it, including dis	sposal sites.		
	Hazardous material means anything an environm	nental law defines as a hazardous waste, hazardo	ous substance,	
	toxic substance, hazardous material, pollutant, co	ontaminant, or similar term.		
epor	all notices, releases, and proceedings that you kn	now about, regardless of when they occurred.		
•		•		
. н	as any governmental unit notified you that yo	ou may be liable or potentially liable under o	or in violation of an environmental law?	
Į.	No			
Ë	Yes. Fill in the details.			
	-	Governmental unit	Environmental law, if you know it	Date of
			•	notice
	Name of site	Covernmental unit		
	Name of site	Governmental unit		
	Number Street	Number Street		
		City State Zip Code		
	City State Zip Code			
. Н	ave you notified any governmental unit of any	y release of hazardous material?		
Į.	No			
Ē	Yes. Fill in the details.			
		Governmental unit	Environmental law, if you know it	Date of
				notice
		Covernmental unit		
	Name of site	Governmental unit		
	Name of site			
	Name of site Number Street	Number Street		
		Number Street City State Zip Code		

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Debt	or 1			М	Tichacek	Case	number (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	in any judic	ial or administra	ative proceeding under	any environmenta	al law? Include settlements and order	rs.
	V	No						
	Ħ	Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
		0						case
		Case title						Pending
					Court Name			On appeal
		Case number			Number Street			Concluded
					07.	7: 0: 1:		Concided
		•			City State	Zip Code		
Part	11:	Give Details A	bout Your	Business or	Connections to Ar	y Business		
27.	Witl	nin 4 vears before	vou filed for	bankruptcv. did	I vou own a business or	have any of the fo	ollowing connections to any busines	s?
		_				-		
				-	profession, or other activit		part-time	
				y company (LLC	c) or limited liability partners	ship (LLP)		
		A partner in a						
				ging executive of		_		
		An owner or at	least 5% of tr	ne voting or equit	y securities of a corporation	ın		
	✓	No. None of the abo						
		Yes. Check all that a	apply above a	nd fill in the detail	ls below for each business	•		
					Describe the natu	ire of the busines	• •	
							include Social Security n	umber or ITIN.
		Business Name			_		EIN:	
							Datas husinasa suistad	
		Number Street			Name of account	ant or bookkeepe	Dates business existed r	
		City	State	Zip Code			From To	
		Oity	Olaic	Zip Oodc				
					Describe the natu	re of the busines		
							include Social Security n	umber or ITIN.
		Business Name					EIN:	
		Number Street			Name of account	ant or hookkeene	Dates business existed	
						ant or bookkeepe	From To	
		City	State	Zip Code			11011110	
					Describe the natu	ura of the business	c Employer Identification a	number De not
					Describe the nati	ire of the busines	s Employer Identification include Social Security n	
							EIN:	
		Business Name						
		Number Street					Dates business existed	
		. Tarribor Otroge			Name of account	ant or bookkeepe	r	
		City	State	Zip Code			From To	
		•		1				

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Deb	tor 1	Rachael	M	Tichacek	Case number (if known)	
		First Name	Middle Name	Last Name		
28.		nin 2 years before you filed f litors, or other parties.	or bankruptcy, did you	give a financial statement t	o anyone about your business? Include all financial institutions,	
		No Yes. Fill in the details below.				
	_			Date issued		
		Name		MM/DD/YYYY		
		Number Street				
		City State	Zip Code			
Part	12.	Sign Below				
1	I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
		/s/ Rachael Ti		>	· -	
		Signature of Debt	or 1		Signature of Debtor 2	
		Date 10/28/2016			Date	
ı	Did y	ou attach additional pages t	o Your Statement of Fir	nancial Affairs for Individua	als Filing for Bankruptcy (Official Form 107)?	
ı		lo			,	
i		´es				
ı	Did y	ou pay or agree to pay some	eone who is not an attor	ney to help you fill out ban	kruptcy forms?	
	✓ N	lo				
İ	Y	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,	

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Fill in this info	rmation to identify your cas	e:		
Debtor 1	Rachael	M	Tichacek	
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse, if filing	ng) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)				_

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property as exempt on Schedule C? secures a debt? Surrender the property. No. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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Debtor	Rachael	М	Tichacek	Case number (if
1	First Name	Middle Name	Last Name	known)
!-4 V	a Unavaired Deserved D			Part 2:
For any informat		lease that you listed in S ate leases. Unexpired lea	ases are leases that are still	tracts and Unexpired Leases (Official Form 106G), fill in the in effect; the lease period has not yet ended. You may assume)(2).
Des	cribe your unexpired persona	I property leases		Will the lease be assumed?
Less	sor's name: Kozak, Mary			No Yes
	cription of leased erty: Month to month lease			
Less	sor's name:			□ No □ Yes
Des prop	cription of leased erty:			
Less	sor's name:			☐ No ☐ Yes
	cription of leased erty:			
Less	sor's name:			No Yes
Des prop	cription of leased erty:			
Less	sor's name:			No Yes
Des prop	cription of leased erty:			
Less	sor's name:			No Yes
	cription of leased erty:			
Less	sor's name:			No Yes
Des prop	cription of leased erty:			
Unde	Sign Below r penalty of perjury, I declare erty that is subject to an unex		intention about any proper	ty of my estate that secures a debt and any personal
	s/ Rachael Tichacek		*	
	gnature of Debtor 1			e of Debtor 1
Da	ate 10/28/2016 MM/DD/YYYY		Date	M/DD/YYYY

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Rachael M Tichacek	ĸ	Case No.	
_	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATION	ON OF ATTORNEY F	OR DEBTOR
1.	that compensation paid to me wit	thin one year before the fil	, I certify that I am the attorney for ling of the petition in bankruptcy, or r(s) in contemplation of or in connection	agreed to be paid to me, for
	For legal services, I have agreed	I to accept		\$0.00
	Prior to the filing of this statemer	nt I have received		\$0.00
	Balance Due			\$0.00
2.	The source of the compensation p	paid to me was:		
	Debtor	Other (spe	cify)	
3.	The source of the compensation	paid to me is:		
	✓ Debtor	Other (spe	ecify)	
4.	I have not agreed to share th members and associates of	ne above-disclosed compe my law firm.	ensation with any other person unles	ss they are
		ny law firm. A copy of the a	tion with a other person or persons vagreement, together with a list of the	
5.		~	der legal service for all aspects of t lering advice to the debtor in determ	
	b. Preparation and filing of a	iny petition, schedules, sta	atements of affairs and plan which	may be required;
	c. Representation of the deb	otor at the meeting of cred	itors and confirmation hearing, and	any adjourned hearings thereof;
6.	By agreement with the debtor(s),	the above-disclosed fee of	does not include the following service	ces:
		CERTII	FICATION	
	I certify that the foregoing is a com he debtor(s) in this bankruptcy proc		greement or arrangement for paym	ent to me for representation
	10/28/2016		/s/ Angie Harb	
	Date		Signature of Attorney	_
			Semrad Law Firm	
			Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

-	\$310	total fee
+	\$75	administrative fee
	\$235	filing fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Tichacek, Rachael M	Case No		
	Debtor(s)	0450 110.		
		Chapter.	Chapter7	
	VERIFICATIO	N OF CREDITOR MAT	RIX	
	The above named Debtors hereby verify that the	attached list of creditors is true	and correct to the best of the	ir knowledge
Date:	10/28/2016	/s/ Tichacek, Rad	chael M	
	10202010	Tichacek, Racha Signature of Deb	el M	

Chrysler Capital P.O. Box 961275 Fort Worth , TX 76161

Fed Loan Serv Pob 69184 Harrisburg , PA 17106

Fed Loan Serv Pob 69184 Harrisburg, PA 17106

VERIZON WIRELESS PO BOX 4002 Acworth , GA 30101

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

PORTFOLIO RC 120 Corporate Boulevard Norfolk , VA 23502

Comenity Bank Po Box 182124 Columbus , OH 43218

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

PORTFOLIO RC 120 Corporate Boulevard Norfolk , VA 23502

CAB SERV 60 BARNEY DR JOLIET, IL 60434 I C SYSTEM INC PO BOX 64378 SAINT PAUL , MN 55164

VERIZON WIRELESS PO BOX 4002 Acworth , GA 30101

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago , IL 60606

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

CHASE 340 S Cleveland Ave Bldg 371 Mail Code OH1-1272 Westerville , OH 43081

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602

Illinois Tollway PO Box 5544 Chicago , IL 60680 Document Page 62 of 69

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC, to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I agree to pay The Semrad Law Firm, LLC \$ 0.00 in attorney fees plus costs in the amount of \$ 335.00 to represent my interests in the preparation and filing of my Chapter 7 Petition and Schedules; preparation and attendance of the Section 341 Meeting of Creditors; review of any redemption agreements; review of any reaffirmation agreements; and case administration and monitoring. I further understand and agree that additional professional legal services will result in fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representing Client in Adversary Proceeding.

Adding additional bills

Motion to Reopen and Avoid Lien

Motion to Reopen

10/28/2016

\$300.00/hr.

\$50.00

\$1000.00

\$350.00 + court costs

Desc Main

I understand that these fees must be paid before such work will be completed. I acknowledge and agree that as the above additional fees constitute post-petition services, they are not dischargeable in my Chapter 7 case.

I also understand that, unless otherwise agreed, my Chapter 7 bankruptcy case will not be filed until I pay the attorney fees in full. As The Semrad Law Firm, LLC will begin to work on my file immediately after entering into this contract; I understand that any and all funds paid are not refundable.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay the balance of any unpaid fees to The Semrad Law Firm, LLC. Any fees owing to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy may be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay unpaid fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. Lunderstand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw representation in the event that I do not sign a second retainer after filing my case promising to pay said fees or in the event that I do not pay said fees.

I understand that any funds that I am tendering to The Semrad Law Firm, LLC, as part of this advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm. I further understand that it is ordinarily my option to deposit funds with an attorney that shall remain my property as security for future services. However, The Semrad Law Firm, LLC, does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. I further understand that the benefit that I am receiving under this fee arrangement is the commitment of The Semrad Law Firm, LLC, to perform any and all work reasonably necessary to file my case absent any extraordinary circumstances.

Rachael Tichacek

10/28/2016

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As The Semrad Law Firm, LLC, has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC. This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.*

I also understand that, if I am refiling a case with The Semrad Law Firm, LLC, and an audit of the previous case(s) indicate that remaining attorney fees are owed; any initial funds I pay to refile will first be applied to the balance owed on the previous case(s). If client breaches this agreement, client will be responsible for all costs associated with enforcing the terms of this contract including but not limited to court costs and attorney fees.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC, or an agent thereof.

Pachael Johael Rachael Tichacek

O M., Attorney

*DISCLAIMER

The creditors listed in your bankruptcy petition will receive notice of your bankruptcy filing from the Clerk of the United States Bankruptcy Court. Please be advised that it will be several days before these creditors receive the notice. Therefore, if you are concerned about a particular creditor taking immediate action against you, contact this creditor directly and provide the creditor with a copy of your Notice of Bankruptcy Filing. This is especially important if you are at risk of having you vehicle repossessed, real estate foreclosed, or wages garnished.

Rachael Tichacek

Initial:

Rev 3/2016

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Debtor 1 Rachael	M Middle Name	Tichacek Last Name	Case number (if known)	**************************************		
	estions for Reporting Purpo					
16. What kind of debts do you have?	16g. Are your debte primarily apparatus debte? Case was debte as defined in 11110 0 010100 as					
17. Are you filing under Chapter 7? Do you estimate that	No. I am not filing under Chapter 7. Go to line 18. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative					
after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ No.	hat funds will be availat	ole to distribute to unsecured o	creditors?		
18. How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	1,000- 5,001- 10,001	3	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,00 \$50,00	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	丁 \$10,00 丁 \$50,00	,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Pare/s Sign Below			HISTORIA DE SERVICIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DEL COMPANIO DE LA COMPANIO DEL COMPANIO DEL COMPANIO DEL COMPANIO DEL COMPANION DEL COMPANIO DEL COMPANIO DEL COMPANIO DEL COMPANION DEL COMPA			
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill					
	out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134T, 1519, and 3571. /s/ Rachael Tichaeek Signature of Debtor 1					
	Executed on 10/28//	/DD / YYYY	Executed on _	MM / DD / YYYY		

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Fill in this info				
	rmation to identify your ca	ise:		
Debtor 1	Rachael	М	Tichacek	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:		District of Illinois	
	-anti-optoy obstition the.	TVO CITATI	(State)	
Case number (If known)				
Official	Form 106De	C		Check if this is an amended filing
Declarat	ion About an I	ndividual Debte	or's Schedules	12/15
f two married	people are filing togethe	r, both are equally respon	sible for supplying correct inform	ation.
Park its Sign Did you p		ERONADAS AND BETTO CONTROL OF THE TENENT AND SALES AND S	THE CONTRACTOR (CASE OF A STATE O	TREEDERSCHING FAN FOR SAMOWING OUT OF CLASS SELECTION OF CONTRACT OF THE SELECTION OF THE S
No	ay or agree to pay some	one who is NOT an attorne	y to help you fill out bankruptcy	forms?
Emmed	Name of person	one who is NOT an attorne		reparer's Notice, Declaration, and

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Debtor :	Rachael	M	Tichacek	Case number (f known)
	First Name	Middle Name	Last Name	
28. Wi	thin 2 years before editors, or other pa No Yes. Fill in the det	rties.	rou give a financial state	nent to anyone about your business? Include all financial institutions,
Instituti			Date issued	
			pate issued	
	Name		MM/DD/YYYY	

	Number Street			
	City	State Zip Code		
	Only	Owie Tib Code		
Part 12	Sign Below			
true a ba	and correct. I undenkruptcy case can /s/ Signati	Rachael Tichacek 0/28/2016	atement, doncealing proj , or imprisonment for up t	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with the 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date
Did y	ou attach addition	al pages to Your Statement o	f Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
Louis	No Yes			
Did y	ou pay or agree to	pay someone who is not an a	ttorney to help you fill ou	bankruptcy forms?
*******	No			
Ľ	Yes. Name of person	•		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Rachael	M	Tichacek	Case number (if
	First Name	Middle Name	Last Name	known)
Part 2:	**************************************	red Personal Property Leas		
informa	tion below. Do not I	property lease that you listed i list real estate leases. Unexpire mal property lease if the trustee	d leases are leases that	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	scribe your unexpire	d personal property leases		Will the lease be assumed?
	sor's name: Kozak,	Mary		☐ No Yes
	cription of leased perty: Month to mo	nth lease		
Les	sor's name;			No Boundary No
	cription of leased perty:			Yes
	sor's name:			No Yes
	cription of leased perty:			Boom!
				§*************************************
Les	sor's name:			No Yes
	cription of leased perty:			
Les	sor's name:			No Yes
	cription of leased perty:			Tearne2
Les	sor's name:			Primery No.
	cription of leased perty;			Yes
Les	sor's name:			No Tyes
	cription of leased perty:			Local 1
Part 3:	Sign Below		Hillion and the second construction of the secon	
prop		to an unexpired lease.	my intention about any	property of my estate that secures a debt and any personal
	gnature of Debtor 1	JUNEAU LE	_ CO.	nature of Debtor 1
Di	ate 10/28/2016 MM/DD/YYYY		Dat	e MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

In re:	Tichacek, Rachael M	Case No	
Debtor(s)		Case NO.	49-49-19-19-19-19-19-19-19-19-19-19-19-19-19
		Chapter.	Chapter7
	VERIFI	CATION OF CREDITOR MATRIX	
knowledg	The above named Debtors hereby ver	ify that the attached list of creditors is true and co	prect to the best of their
Date:	19/28/2016	/s/ Tichacek, Rachael M	Schoelle johard
		Tichacek, Rachael M	

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Debtor 1 Rachael	M	Tichacek	Case number (îl known)	
First Name	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 c	
8. Unemployment compensation not enter the amount if under the Social Security Ac	you contend that the amount	received was a benefit	\$ <u>0.00</u>	non-filing	spouse
For your spouse		\$200.00 \$0.00			
 payments received as a victi 	urity Act. urces not listed above.Spece per a crime aga rorism. If necessary, list other	aify the source and Social Security Act or Inst humanity, or	\$ <u>0.00</u>		
Total amounts from separat	e pages, if any.		+\$0.00	+	
11. Calculate your total cureach column. Then add the tot	rent monthly income. Add li al for Column A to the total fo	-	\$2,240.29	+	\$2,240.29
Pan 24 Determine Wheth	er the Means Test Appl	es to You			Total current monthly income
 Calculate your current m 12a. Copy your total current 	onthly income for the year. monthly income from line 11				
	mber of months in a year).	•	C	opy line 11 here →	\$2,240.29
	al income for this part of the	om.			X 12 12b. <u>\$26,883.48</u>
13 Calculate the median fam	ily income that applies to y	ou. Follow these steps:			
Fill in the state in which you	live.	Illinois			
Fill in the number of people	in your household.	2			
Fill in the median family inco household.	me for your state and size of				13. \$63,896.00
To find a list of applicable m instructions for this form. The 14. How do the lines compare	edian income amounts, go or is list may also be available at o?	nline using the link speci the bankruptcy clerk's c	ified in the separate office.		L
14a. Line 12b is less the Go to Part 3.	an or equal to line 13. On the	top of page 1, check bo	ox 1, There is no presumption	of abuse.	
14b. Line 12b is more t Go to Part 3 and fi	han line 13. On the top of pa Il out Form 122A-2.	ge 1, check box 2, The p	presumption of abuse is dete	rmined by Form 12	2A-2.
Pari 38 Sign Below					
By signing here, I declare u	nder penalty of perjury that th	on this sta	stement and in any attachmer	nts is true and corre	ct.
/s/ Rachael Tichace Signature of Debtor	LochoutMa	hart ,	Signature of Debtor 2		
Date 10/28/2016 MM/DD/YYYY			Date 10/28/2016 MM/DD/YYYY		
If you checked line 14a, o	lo NOT fill out or file Form 12 ill out Form 122A-2 and file it	2A-2. with this form.			

Official Form 122A-1